



Docket No.: 000166.0109-US04  
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:  
David Edwards et al.

Application No.: 10/771,447

Group Art Unit: 3743

Filed: February 5, 2004

Examiner: M. B. Patel

For: INHALATION DEVICE AND METHOD

**TRANSMITTAL LETTER**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced  
Patent Application:

1. Fee Transmittal;
2. Amendment Transmittal Letter (in duplicate);
3. Amendment in Response to Non-Final Office Action;
4. Terminal Disclaimer to Obviate a Double Patenting Rejection Over a "Prior"  
Patent(6,766,799);
5. Terminal Disclaimer to Obviate a Double Patenting Rejection Over a  
"Reference" Application (10/867,375);
6. Terminal Disclaimer to Obviate a Double Patenting Rejection Over a  
"Reference" Application (10/771,551);

7. Statement under 37 CFR 3.73(b);
8. Check No. 359094 for \$390.00 to cover the statutory disclaimer fees; and
9. Return receipt postcard.

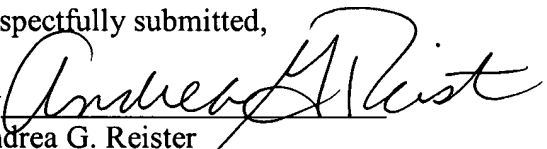
The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 50-0740, under Docket No. 000166.0109-US04. A duplicate copy of this paper is enclosed.

It is not believed that extensions of time or fees for net addition of claims are required beyond those that may otherwise be provided for in documents accompanying this paper. However, if additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to our Deposit Account No. 50-0740.

Dated: March 2, 2006

Respectfully submitted,

By

  
Andrea G. Reister

Registration No.: 36,253  
COVINGTON & BURLING  
1201 Pennsylvania Avenue, N.W.  
Washington, DC 20004-2401  
(202) 662-6000  
Attorney for Applicant



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>	
		Application Number	10/771,447-Conf. #3817
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	February 5, 2004
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	David Edwards
		Examiner Name	M. B. Patel
		Art Unit	3743
		Attorney Docket No.	000166.0109-US04

<b>METHOD OF PAYMENT (check all that apply)</b>	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____
<input type="checkbox"/> Deposit Account	Deposit Account Number: <u>50-0740</u> Deposit Account Name: <u>Covington &amp; Burling</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
						Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
17		- 22 =	x	=	Fee (\$)		Fee Paid (\$)
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
2		- 3 =	x	=			
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
	- 100 =	/50 (round up to a whole number) x		=			
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1814 Statutory Disclaimer						390.00	

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	36,253
Name (Print/Type)	Andrea G. Reister	Telephone	(202) 662-6000
		Date	March 2, 2006



## AMENDMENT TRANSMITTAL LETTER

Docket No.  
000166.0109-US04

Application No.  
10/771,447-Conf. #3817

Filing Date  
February 5, 2004

Examiner  
M. B. Patel

Art Unit  
3743

Applicant(s): David Edwards et al.

Invention: INHALATION DEVICE AND METHOD

### TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	17	- 22 =		x	
Independent Claims	2	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Terminal Disclaimer fees					390.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					390.00

☒ Large Entity

☐ Small Entity

☐ No additional fee is required for this amendment.

☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.

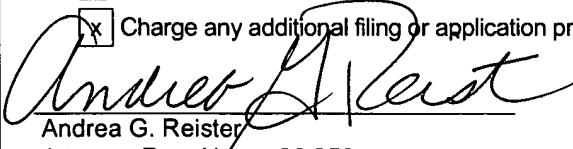
☒ A check in the amount of \$ 390.00 to cover the terminal disclaimer fees is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 50-0740  
as described below. A duplicate copy of this sheet is enclosed.

☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

  
Andrea G. Reister  
Attorney Reg. No.: 36,253

Dated: March 2, 2006

COVINGTON & BURLING  
1201 Pennsylvania Avenue, N.W.  
Washington, DC 20004-2401  
(202) 662-6000